STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

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MAY 03 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s)	Jim!	Bouley	& Afex	Kontraiba
II. Name of lobbyist's partners!	hip, firm or corporatio	n, if any:		
Donnah	y & Roule	VILC	_	
(Name of partner	ship, firm or corporation)	y 	-	
Business Address: (Street)	, Suite 3	Conc	ord NH (State)	03301 (Zip Code)
603) <u>228-1601</u> (Telephone)	() ²⁴	(Fax)	e-mail	
III. This statement covers: (Choreportable expense transactions	oose one – file separate s which are not attribu	e reports for each	h client, OR you may fil client).	e a separate report for
All reportable transactions oc	curring in the months p	rior to the reporti	ng date relative to the fol	lowing elient:
Campu	· 1 Q	types	Vetwork I	Fnc.
OR All reportable transactions by unrelated to any particular client.	the lobbyist (including	the lobbyist's far	nily), or the lobbying fire	n listed below which are
IV. Date of Report April 24 Reports cover: octivity from date	1, 2019 (1) 1, 2019 (2) 1, 201		uly 31, 2019 from 4/1/19 to 6/30/19	
October	730, 2019 [] m 7/1/19 to 9/30/19	·	lanuary 29, 2020 [] from 10/1/19 to 12/31/19	
V. There have been no fees if this box is checked, complete j Concord, NH 03301.	received and no repous tust this form and submit	ortable transac	tions made since the l ry of State's Office, State	ast report. House, Room 204,
VI. Check if additional reports	s are attached:			
If you have received fees or	made expenditures, you	u must file Adde	ndum A- Fees and Expe	nses
If you have paid an honorar Expense Reimbursement				
☐ If you, your firm, or your fa	mily has made political	contributions, yo	ou must file Addendum	C- Political Contributions
				•
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B and complete to the best of my	, RSA: 14-C and RSA 60	64 and hereby sw	ear or affirm that the fore	egoing information is true
Atol	4.			<u></u> .
(Signature of loobyist)	/ M .		(Date)	
(Print Name of lobbyist)	1	. •		

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

0.1	1
1. Name of Lobbyist(s) Jim Bouley & Ale	x Kontroubas
II. Name of lobbyist's partnership, firm or corporation, if any:	
Dennehy & Bauley LLC (Name of partnership, firm or corporation)	1 1
III. Name of Client Community Support	
Wetwork to	1C,
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gross reduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)\$ 7,500.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$
c) Total of all fees received to date (Add lines a and b)	c) \$ 7,500-00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reported. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three eategories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by any be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all expenses total of all expenses than \$10 that is given to the person d with a value of \$25.00 or less); and tring period of greater than \$25.00 for e of greater than \$25, purchase of a than \$25, but not greater than \$50 expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	e) \$

e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's reporting period (This should be the amount on line f of addendum A for last month's reporting to the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	e) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from	f) \$
Provide the following detail for all expenditures of more than \$25 made from	
	ons lobbying fees during this reporting
Paid to:	Amount:
	s
	s
•	_ \$
	s
•	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or as is true and complete to the best of my knowledge and belief.	ffirm that the foregoing information
LLG	
(Signature of lobbyist) Jim Boully (Bright Name of lobbyist)	(Date)
(Print Name of lobbyist)	

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State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or eorporation: Dennehy & Bouley LLC
Name of Client (leave blank if Statement is for the partnership, firm, or eopporation and not related to any
particular elient): Community Support Wetwork Inc.
Date of Report (check one):
April 24, 2019 July 31, 2019. October 30, 2019 January 29, 2020
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
Mhll 5/3/19
(Signature of lobbyist) (Date)
Alex Routroubas
(Print Name of lobbyist)